





Pictures by Arthur W. Trott '44

Louis Schwab,  
John P. Hubbell, Jr.

James S. Clarke,  
Robert J. Glaser.

# The Harvard Medical School Dorchester House Clinic

ROBERT J. GLASER, '43.

*(Those of us who went to Harvard College know of the work of the Phillips Brooks House Association. Here Robert J. Glaser, '43 tells of a little known branch organization at the Medical School, through which the students initiate and conduct their own social service.)*

For a number of years, the Phillips Brooks House Association of Harvard University has maintained a Medical School Committee. This Committee, in addition to holding an annual reception for the incoming class, and aiding the Student Council in some of its activities, has also cooperated with various Boston settlement houses by sending third and fourth year men to some of these for the purpose of doing physical examinations on children engaged in activities there.

At first, it was generally the policy to send men only when they were requested so that the program at best was rather spasmodic. Further, the difficulty confronting a medical student who conscientiously attempts to do an acceptable physical examination on an apprehensive boy (and strangely enough, many of the toughest "townies" lose much of their élan before the combination of an ophthalmoscope, stethoscope, and throat stick) in an improvised examining room, 'midst the clamor of an evening's activity in a busy settlement house, is apparent. Finally one could question the value of such a "catch-as-catch-can" program, since no provision was made for following children found to have evidence of pathology, regardless of its nature.

Having taken stock of the situation at this point, it seemed highly desirable to formulate a more efficient plan, in order that this worth-while activity could be continued on a permanent basis with arrangements for adequate follow-up of all cases

where indicated. This latter aspect is obviously of exceeding importance for in follow-up lies much of the value of the entire project as a small scale public-health measure. It is interesting to note here that the men in the third and fourth year classes were most generous in offering their time to take part in these activities, but almost all expressed the opinion that unless the indicated cases were followed, they too felt that the effort was without point.

About June, 1941, a fortunate combination of events enabled us to put our new plan into operation. The Medical School Committee was the recipient of a generous grant from George's Fund of Philadelphia—the same source of a similar grant which set up the very successful Harvard Dental School clinics some years previously. At this same time, Dorchester House, one of the Greater Boston Community Fund Agencies, and one of the oldest settlement houses in Boston, moved from its 55 year old quarters, which had become grossly inadequate, into a large building, which when remodeled afforded excellent facilities for the work of the house. Mr. Dwight Strong, Director of Dorchester House, had taken an active interest in the work of our Committee, and through his cooperation and that of the Trustees of Dorchester House, we were given the requested amount of space in which to set up our new clinic.

Dr. Burwell and Dr. Hale were consulted and were most helpful in giving us the benefit of their advice and support. Dr. Marshall Fulton of the Department of

Medicine kindly agreed to act as Advisor. This he did until he left for military service.

The remodeling of the building itself and the furnishing of our clinic was slowed up by priorities and other concomitants of the war effort, but finally in March, 1942, we were able to begin operation. The clinic consists of three rooms. One of these is the office and waiting room to which the children report. A second large room has been converted into four examination cubicles separated by curtains, after the fashion of the out-patient clinics of the hospitals. Each cubicle has an examination table, desk, chair, and other necessary accoutrements for the successful carrying out of a physical examination. The examining rooms are well located in that they are away from game rooms, stairways and other sources of noise which might interfere with the intricacies of percussion and auscultation. The remainder of the quarters is devoted to a small laboratory and adjoining lavatory. Routinely, specific gravity, albumin, and sugar tests are done.

In general, the clinic is open three nights a week and a given number of children are scheduled for each night and given appointments. This phase is handled by the staff at the settlement house, one of whom is on hand to act as receptionist in the office. The Medical School Committee arranges to have five men at each session—four of these are either third or fourth year men who do the examinations; the fifth is a second year student who is the "lab pup". In this way, many second year men become acquainted with the mechanics of the clinic and in the second half of the year, after they have begun their course in Physical Diagnosis, they are also given an opportunity to see or hear any particularly interesting findings which may turn up.

A standard record form is used, similar to that in use in the Hygiene Department at the Medical School for the routine examinations given medical students. It has been adapted to the age group we see, about eight to fifteen years, and seems to be suitable for our needs. These records

are filed according to the following classification:

1. Normal children without positive findings.
2. Children whose only positive finding is the presence of carious teeth.
3. Children with carious teeth plus other positive findings.
4. Children with positive findings other than carious teeth.

In tabulations made in October 1942, after 138 children had been examined (100 boys and 38 girls), 52 were found to be normal, 46 had carious teeth only, and 40 had additional pathology. In the latter group, there were a significant number of children with signs of rheumatic heart disease. This is to be expected in Boston, of course, where rheumatic fever has a high incidence. These children are almost always without symptoms; most of them have no knowledge of having had the disease, which is in accord with the usual Out-Patient experience. That one-third should have carious teeth bears striking witness to the dental care (or lack of it) which these children have received. Dr. Joseph Ferrebee of the new School of Dental Medicine is interested in this phase. He hopes to make dental clinic service available soon.

Our policy in the group with significant positive findings is to inform Mr. Strong of the given case. His staff then notifies the parents, who are requested to have the child see the family physician. If this is not financially possible, the child is then referred to the Out-Patient Department of a hospital affiliated with Harvard Medical School. It is hoped that the actual following of cases will be carried out by students as part of the course in Preventive Medicine. Preliminary discussions in regard to this have been held and plans outlined.

As time goes on, the children have become aware of the fact that a doctor and a physical examination are not as drastic a combination as they had been led to believe, and they are now very willing to come in once a year to see us. On the other



side, the men in the Medical School have almost universally enjoyed their evenings at the House, and have expressed their willingness to serve when needed.

This project is, as far as we know, the only one of its kind in the country; we hope that further experience will enable us to do a better and better job. By having representatives of each class on the Committee, the organization should be able to continue with necessary unity, despite the graduation of the senior member at each commencement. Next year's chairman, William W. Faloon, 2M, has been an active aide for the greater part of the past two years.

In conclusion then, we feel that our clinic can make a small but worthy contribution in the following ways: first, as a means of uncovering physical defects in a group of growing children; second, the clinic should help create in the children an appreciation of the value of a periodic, routine physical examination, even though there is no symptom of illness; third, it enables medical students to come in contact with apparently healthy children from homes of limited income; from these contacts, one can gain an understanding of some of the aspects and problems of public health and preventive medicine. It is our hope that we can fulfill these criteria.



# Votes for Women

REGINALD FITZ, '09.

There is nothing particularly novel in the history of the Harvard Medical School about discussing votes for women. Nearly a hundred years ago, at about the time when better educational facilities for young ladies first came into the limelight, proposals began for the School to educate them medically and have been recurring from time to time ever since.

In 1847, the Faculty asked the Corporation if a woman might be admitted to the the medical lectures and to take an examination for a degree. The Corporation replied, coldly, that it was not deemed advisable to alter the existing regulations of the School, which seemed to imply that the students were to be exclusively of the male sex.

The question was re-opened three years later, in 1850, by a certain Miss Harriet Hunt who wished to know if she might be admitted to the School. By this time something like a huge snowball in the way of popular opinion toward feminism had grown up around Boston. The First National Women's Rights Convention was to be held in Worcester in the fall of that year and also—which was probably more important to Harvard—a new President, Jared Sparks, had come into office. In any event, the Corporation reversed its previous judgment and now failed to see the slightest objection to admitting female students to the medical lectures, side-stepping, however, a decision as to their justification in attempting to claim therefrom a medical degree. It was the male students at that particular time who complained so vociferously to possible feminine interference with their studies as to deter even the courageous Miss Hunt from joining them.

In 1856, Marie Elizabeth Zakrzewska, a young woman of Polish extraction, received the degree of M.D. from the Cleveland Medical College in Ohio which, incidentally, was the immediate progenitor of Western Reserve. She was remarkable in many ways and something of a pioneer in the cause of votes for women. She moved

to Boston and with several henchwomen presently founded the New England Hospital for Women and Children and opened a proprietary school called the New England Female Medical College. In 1867, two of its teachers wished post-graduate instruction from Harvard and asked the privilege of attending certain of our lectures. Now the Faculty put themselves on record by expressing to the Corporation the wish that females should not be allowed to attend our lectures or to receive any instruction whatsoever at the Medical School, adding, however, perhaps to leave a little crack by which the door might be opened later, 'under present organization'. The Corporation backed up the Faculty and thus these ladies were repulsed.

In 1872, the New England Female Medical College accosted Harvard in a manner that Harvard seemed to consider as almost indelicate. The Female Medical College, looking for wider scope and a firmer base, suggested, in fact, that it be adopted by the University. Harvard did not accede to this solicitation and thus the New England Female Medical College cast about for another lord and master, transferred its affections to Boston University, and to-day lives happily in the fond embrace of that institution.

Dr. Zakrzewska and her colleagues during the sixteen years between 1856 and 1872, besides transforming their Medical College into an integral part of a University, also built up their Hospital into a well-known charitable organization with a good deal of popular appeal. It managed to attract to its doors feminine medical scholars from all over the United States, with a few from Europe, and at the same time it acquired a good many New England dollars. People knew of the success of this undertaking, gossiped about women's rights at dinner parties, and began even to wonder why Harvard was so slow in encouraging medical co-education. So in 1878, Miss Marion Hovey, a bluestocking of the Boston Back Bay variety, determined to try

an experiment. She was prepared to give ten thousand dollars from her father's estate to the School if its advantages could be offered to women on equal terms with men.

This proposal precipitated a fiery, long drawn out debate in which were involved the Faculty, the Overseers, and the Corporation. The reaction of the Faculty to Miss Hovey's proposal is interesting considering the opinion it expressed so positively only a few years before. Now some of its members, notably Dr. Henry J. Bigelow, still were unalterably opposed to coeducation at Harvard; others, and in about equal number, were strongly in favor of it; and finally sort of a compromise was reached by which the Faculty agreed to undertake the education of women in the School provided sufficient money could be obtained to warrant the effort. The Faculty thought that about \$200,000 would be needed to do the job properly—a proposed sum which made Miss Hovey's opening bid of \$10,000 look paltry. Dr. Holmes was out-voted when he tried to peg the desired amount down to \$100,000.

The matter was referred to the Overseers and they submitted to the Corporation a majority and a minority report. President Eliot supported the majority report. This makes long reading but recommends in essence that after the completion of the new building women should be admitted to the Medical School on a par with men, not permanently but for a 10-year period, and entirely on an experimental basis.

When the Faculty heard of this they at once made the plea that they had their hands overfull with problems of curriculum reorganization and new building plans and therefore just then considered it inexpedient to commence experiments with coeducation. The Overseers came to see the logic of this viewpoint, hence the upshot of the whole business was that Miss Hovey's letter, written to the authorities in March 1878, was answered in July 1879 with the reply that while the President and Fellows recognized the importance of providing thorough medical education for women they did not find

themselves able, under existing circumstances, to accept Miss Hovey's generous proposal.

One imagines from the rapidity with which Harvard news climbs the grapevine that several interested persons living in Boston were informed of Miss Hovey's offer, knew the seriousness with which Harvard had considered it, and believed that larger efforts along the same line might be more productive. For in September 1881, Dr. Zakrzewska asked if, by any chance, Harvard would now accept \$50,000 for the purpose of providing such medical education for women as would entitle them to the degree of doctor of medicine from the University. The ante, one perceives, had been raised fivefold in three years—an achievement of no mean proportions—and was beginning to be worth talking about.

This offer reopened the controversy aroused by Miss Hovey and dragged it along until April 1882 when the Corporation again voted, much as they had before, that while they recognized the importance of thorough medical education for women they did not feel able to accept Dr. Zakrzewska's proposal. It seemed to be not quite good enough.

A year later people still were talking about medical education for women though the excitement was much less intense than it had been. Dr. Zakrzewska and her cohorts were growing older, all their offers had been refused, and by now, little by little, opportunities for women to acquire medical education had developed in other parts of the country. Nevertheless the story is told that Dr. Holmes received a handsome burst of applause when he spoke of nursing in the fall of '83 at the Centennial Celebration and said, "I have always felt that this was rather the vocation of women than general medical and especially surgical practice". But the applause which followed this remark was nothing in contrast to that which broke out when he went on to say, "If here and there an intrepid woman insists on taking by storm the fortress of medical education I will have the



gate flung open to her as if it were the Citadel of Orleans and she were Joan of Arc returning from the field of victory!"

Following the storm created by Miss Hovey, there was an armistice which lasted for nearly twenty-five years. Then, with the new buildings about to be opened, the Dean in 1905 presented a request from the Corporation. It appeared that a certain group of female physicians once again petitioned that women should be taught medicine in our new quarters on the same terms as men: the Faculty were asked to advise the Corporation as to how this request should be answered. A Committee was formed to study the matter; the Faculty voted that it was impracticable to admit women to the regular curriculum of the Medical Department of the University; and the Corporation supported the Faculty.

In 1917, our supply of acceptable prospective students was running low. By this time many competent women physicians had been trained in other medical schools so that clearly the idea of educating women in medicine was not as fantastic as once it appeared. Thus as a War measure a scheme was evolved by which Radcliffe was to offer a course in Medicine which was to be given at the Harvard Medical School by our Teaching Staff, the degree to be awarded by Radcliffe although the actual teaching and grading of the students was to be done by our teachers.

This plan exploded rather like a toy balloon. It was announced at a meeting of the Administrative Board in September 1917 and made public a little later. Unfortunately only twenty candidates were attracted by it: of these, sixteen were unable to claim the requisite college training to meet our admission requirements; three elected to go to other schools; no one seems to know what became of the one that was left. President Lowell remarked with characteristic clarity and brevity that the plan was abandoned though the question of admitting women to the Medical School was still open.

Following the War a spirit of liberalness pervaded the University. Women graduate students at Radcliffe working for advanced degrees in the medical sciences began to appear around the Medical School. In 1919 Dr. Alice Hamilton was appointed Assistant Professor of Industrial Medicine, the first woman to appear on our Faculty Rolls. On June 23, 1921, Dr. John Warren, University Marshal of supreme dignity, had an uncomfortable morning for he saw thirty-six women candidates awarded the degree of Master of Education at Commencement—the first women ever to receive a regular Harvard degree. As time went on, women received other Harvard degrees, including degrees from the School of Public Health, and women began to be seen not infrequently in the laboratories and libraries of the School.

At present we are in the midst of another War and facing the prospect of a diminishing supply of acceptable prospective male students. Without much doubt the question of accepting women students will arise again. It will be interesting to learn how the matter will be settled today in light of all the prejudices of the past.

The Medical School of Western Reserve University will soon complete its first hundred years of continuous existence. During these hundred years the relations between it and ourselves have been friendly with a certain amount of professional give and take on both sides. In recent years we have given them Elliott Cutler—sort of an Indian gift to be sure, for we took him back later—they have given us Alan Moritz, and we have mutual pride in Harvey Cushing who so particularly seemed to belong to us both.

If the time comes when women are admitted to the Harvard Medical School on full parity with men, we must give Western Reserve due credit for influencing us to take this step. For it was their pupil, Marie Zakrzewska, who came to Boston imbued with their ideas and began to dig the grave in which finally will be buried a curious medical antipathy.



# Two Oliver Wendell Holmes Letters

HENRY R. VIETS, '16.

Read at a meeting of the Massachusetts Historical Society, Dec. 10, 1942

During most of the nineteenth century medical education in Boston passed through a period of confusion and instability. The Harvard Medical School gave brief courses which apparently did not satisfy all the students. This situation gave rise to the establishment of the private medical schools giving instruction throughout the year. One of the most successful was the Tremont Medical School in Boston which ran for over thirty years and gave the best instruction to medical students for a generation. The instigator of this school in 1838 was David Humphreys Storer and among the teachers prominent in the school was Oliver Wendell Holmes. The import of this school has not been well defined. It is known, of course, that the faculty were drawn from the best of the medical practitioners living in Boston at that time and it is presumed that the instruction was excellent, certainly as good as that given over a much briefer period of time per year by the Harvard Medical School. Some of the teachers, moreover, were on both faculties.

Further light on one member of the faculty is revealed in a letter written by Oliver Wendell Holmes in 1868 to Dr. Storer at the time of Storer's resignation from the Harvard Medical School. Storer's character is estimated by one of his closest friends and the letter also indicates that the school suffered a great loss when Storer resigned. Holmes apparently knew that other changes were coming although he was willing to hold on a little longer himself.

Letter from Oliver Wendell Holmes to David Humphreys Storer:

164 Charles Street (Boston)  
July 7th, 1868

My dear Storer,

I cannot bear to think that we are to be separated, but I suppose that I must ac-

quiesce with the rest in your decision. To me personally it is a great loss to have you leave the Faculty. More than half my life has been spent in the pleasantest and kindest relations with you as my fellow-teacher. Your enterprise started the School out of which grew the more modern aspect of medical teaching in Boston, at least, and which has done good service to one entire generation of mankind. Those who remember your agency in founding the Tremont Medical School,—Those who have been witnesses of your zeal and disinterested activity as a teacher from that day to this, appreciate what the Profession and the public owes to you. As teacher, as Dean, as a friend to every student, as a faithful colleague, a successful instructor, a valued friend, you may be sure that you leave your colleagues deeply regretting that you should feel it your duty to retire from an office you have so well filled and are so well filling.

I say this personally because any letter signed by the Faculty or several members of it might have an official look and seem like a respectful formula. But I tell you it is not myself only but all your old associates at least who will miss you more than you believe.

We have often differed among ourselves and there were some points on which you may have been—perhaps, for I am not sure—in as small a minority as I was on the woman question. But nothing has in the least alienated your colleagues from you—no difference has produced any lasting feeling and it will be with unfeigned sorrow that they learn your determination.

For myself I should be glad for various reasons to hold my office a while longer, if I can do so acceptably, but it will no longer be the same as when I had you at my side, and having as I always did, many of your views and always able to differ from you

without its ever for a moment interfering with our most friendly relation.

It cannot be very long before the Faculty is in the charge of the younger men altogether, and I hope we shall all keep up an interest in it and remember how many pleasant years we have passed together in the work of medical instruction.

Believe me always, dear Dr. Storer

Faithfully yours,

O. W. Holmes

In 1870 came the reorganization of the Harvard Medical School under Charles Eliot. There was a good deal of heart burning and it must have been difficult for the old established men to see such drastic changes inaugurated. A second Oliver Wendell Holmes letter to Cornelius Rea Agnew, clinical professor of diseases of the eye and ear, College of Physicians and Surgeons, New York, written in 1873, shows that Holmes realized that the new experiment at the Harvard Medical School was intended to reduce the confusing plan of education long prevailing in Boston and there was being applied to medicine the same systematic forms of education as those applied by Harvard University to other professions. Holmes was ready to acknowledge that the change was desirable, although it is well known that he at first was rather opposed to such drastic action as that instigated by President Eliot.

In addition, the second letter is an extraordinary tribute to Elisha Bartlett by Oliver Wendell Holmes, written in a style that is particularly characteristic of Holmes, the literary figure. Both letters are now in the Boston Medical Library.

Letter from Oliver Wendell Holmes to Cornelius Rea Agnew, New York:

Boston, Feb. 22d, 1873.

My dear Sir

I regret very much that it is not in my power to accept your polite invitation on behalf of the Association of the Alumni of the College of Physicians and Surgeons\* to attend their Anniversary Festival.

\*New York. Agnew was clinical professor of diseases of the eye and ear.

It has been my privilege to hold friendly relations with many whose names are or have been inscribed on the roll of your Faculty. First of all I must mention that of Elisha Bartlett\*\*, who was my colleague during one of the two pleasant seasons I passed at Dartmouth\*\*\*, as Professor of Anatomy and Physiology. He was a man so variously enriched by nature and training, that when he was a magistrate it seemed as if he were born for public life, when he lectured that he ought always to be a teacher, when he wrote on medical science as if his balanced intellect had marked him for the judicial ermine. To much learning and more wisdom he added a grace of style which invested his subject,—too often “harsh and crabbed”, as dealt with by its awkward experts,—with such a luminous atmosphere of passionless, unheated yet inspiring eloquence, that his reader is often tempted to exclaim

“How charming is divine philosophy!”

It is an inheritance to have known that noble nature, and his sweet smile comes back to me as I write, as it does I doubt not, to others who remember him, like a ray of purest sunshine.

I hesitate more to speak of the living members of your Faculty, two of whom went out from our own College and our own people to become famous in your great city and that larger world in which it is a leading centre. There is the distinguished Professor who has carved his name in capitals on the tablets of your surgical history\*\*\*\*. There is the author of the physiological text-book which by the clearness of its statement, the excellence of its illustrations and the valuable original results it embodies, has become a favorite, or shall I say, a classic—with pupils and their teachers\*\*\*\*\*.

\*\*Professor of materia medica and medical jurisprudence in the College of Physicians and Surgeons, New York, 1852-55.

\*\*\*1839, 1840.

\*\*\*\*Probably Willard Parker, a graduate of the Harvard Medical School in 1830.

\*\*\*\*\*John C. Dalton, who graduated from the Harvard Medical School in 1847.

You see, then, that I should have memories to revive, and friends to meet. I should also be glad to tell you what I could of our experiment at Harvard to reduce the somewhat confused plan of education long prevailing in our Medical College, and not unknown to others, to some such order as is recognized as the best way to give a thorough training in other branches of knowledge.

But we are just now in the strain of the effort to accomplish what I believe all are ready to acknowledge is a desirable change, and instead of talking of what we have ef-

fected I should have to tell you of what we are doing, and trying to do, and hoping to do, and firmly trusting that we shall do. We are confident of your good wishes, as you have always had ours in your efforts to uphold the standard of medical education.

Hoping you will have,—as you must have—a pleasant meeting and wishing I could be with you,

I am, dear Dr. Agnew

Yours very truly,

O. W. Holmes

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*The following letter written by Logan H. Roots, '30 and his wife has just been received.*

Central China College  
Hschow, via Tali  
Yunnan, China

DEAR FRIENDS:

Our last general letter to friends at home was written in November 1940, while we were still in Anking, Central China. Now it is the autumn of 1942. You may have guessed that things have been happening to us as well as to the rest of the world. But let us first reassure you that we are all well, busy, and very grateful for the goodness that follows us. Our welfare need not be a part of your concern. Others need it more.

In December 1940 came orders from our Hankow and Wuhu Bishops that all mission women and children must leave occupied China. We left Anking on Jan. 9, 1941, after a week's quick packing. Our orders were to go to the coast and wait; so we went down river by Japanese boat and got rooms at the Shanghai American School for one month. Eleanor had her only experience at a public school at that time. Logan then received orders to go as physician to Central China College. It had moved from Wuchang to Yunnan province, far to the southwest in Free China. But the family had to be disposed of and no permission was being granted to such for west China. We had finally decided to go to Perth, Australia, (nearer

China than America is). We had our bookings when suddenly word came that we might *all* go to Yunnan. We lost no time and sailed from Hongkong February 18. In late winter we entered the tropics on a Norwegian freighter, enjoying the flowers and strange sights of Singapore and Penang on the way. On March 9, we reached Rangoon, the fascinating great port of Burma. It was the beginning of the very hot season.

We began at once to buy supplies for our new home in an isolated, mountainous plateau. Also, we had to wait for a new truck to be fitted for transport on the Burma Road, and the work went slowly. Meantime, Loretta, our five-year-old, had to enter the big city hospital with acute bacillary dysentery. For three weeks I helped nurse her there. An English physician and an Indian child specialist gave her good treatment, and late in April she was convalescing. Two of our party had started on with the new truck loaded with personal baggage and supplies for the college. Near Mandalay, the truck and all its load burned,—cause unknown. Word reached us in time so that we could replace some of our lost household goods. Many of our most needed things had gone by train, so our loss was fairly small in comparison to others. The time in Burma was made much pleasanter by the kindness of friends



with whom we stayed at Judson College. We were often in sight of wonderful, gilded pagodas; once we saw snake charmers with their king cobras. April 22, we left Rangoon by train and arrived safely in Lashio, North Burma, the next night. There we loaded our stuff onto an old truck, the family atop the baggage, and our 16 month-old-son and I beside the driver, Dr. Paul Taylor. We shall never forget that 400 mile drive on the Burma Road. It is a chapter of its own. Never were we more conscious of our Lord's protection nor more grateful for a safe arrival. On May 2, we came into Hsichow.

Hsichow village lies in a beautiful, fertile, rice-growing plain nearly 7,000 feet above sea level, in the western part of the Yunnan plateau, near the far southwest border of China. It is close to the Burma border (hence close to the front) but separated from it by two deep river gorges, the Mekong and Salween. Scenery has rightly been compared to Switzerland with a narrow 30 mile long lake on one side, and 14,000 foot peaks, towering just west of us, snow-capped thru much of the year. The climate is wonderful with a temperature range of about 30-80 degrees, and cool nights always. Five months of rainy season, May to October, and then a winter and spring of dry, sunny days. Our nearest city is Tali, traversed by Marco Polo. The Burma Road cuts by the south edge of the lake. Tibet is northwest of us, and one of the sacred Tibetan mountains lies the other side of our lake. It would be fair to say that this section of China was hardly known to eastern Chinese before bombs and invaders drove them west; though Tali marble has been famous for centuries. Arriving in May, we went directly to Dr. Taylor's home, an old temple which he had fixed over for reasonable comfort. Windows had been cut in the walls and screened; and a very useful bathroom arranged with a large tin tub—one of the few in this region. After two months, he left for America, and we lucky ducks inherited the mansion! This temple is fifteen minutes walk from the town, ten minutes from the college, and

has a lovely cypress grove around three sides of it. The partitions make a study, school-room, dining room, pantry, kitchen, bath on first floor, and two bedrooms and a store room on second. Nine, big, expressive idols keep silent company. There are rice fields, lovely brooks, and little paths around us,—an ideal spot for children: Eleanor is now 8, Loretta 6 and Logan Herbert nearly three years old. The beautiful Ear Lake and foothills are only 30 minutes away, east and west. Our little earthen court yard has four small rock gardens with flowers; and outside are two tiny garden plots for vegetables. Tomatoes do well here. In fact, everything grows well during our warm, rainy season.

The college is also in an old temple. Its bare rooms have been adapted for classes, laboratories, offices, and chapel. There are 150 students this year, the most since the war made the college move. The students know how to live very simply and are the steady, fine kind of young people who will make good leaders for China later on. Food is abundant but very expensive. Charcoal prices make us do without fires except for cooking and baths, but we have enough warm clothes. We can get fresh milk and cheesy butter at fabulous prices, but we have enough for the children. They are growing fast and are very strong and lively.

The College Infirmary is on one side of another smaller temple, with many rats and fleas. Logan holds clinics there and makes many out calls. He leaves home early, carries his lunch, and usually gets home at dusk. There is a Hsichow hospital outside the north gate, established by the gentry (village elders). It boasts thirty odd beds and is modern in many respects. Logan was asked to help with surgery there. For several months past, since the May panic, he has been going to Tali about once a week, a 12 mile bicycle trip, to help in another hospital, chiefly surgery. Last Sunday, there was an emergency Tali call to operate on a patient with long neglected ectopic pregnancy. Tali and Hsichow have had many air raid alarms, but no bombs.



Occasional wounded have stopped by on the way from the front. This August, Logan had ten days of adventure up at the front, helping in organization of a field military hospital. His truck hit a rock, ruining both sets of brakes and almost jumped a bend into the Mekong gorge, but ended in a cliff instead. Logan and six others had already jumped. One of the big issues since last December has been to decide on the right place to serve God and country these crucial years. The regular army medical service abroad seems to be fairly well supplied. So far it seems best to carry on in this spot. When armies moved up through Burma last spring there was an additional problem: whether to move our family east, away from the front. We have been glad we stayed on. Other medical problems arise occasionally. Last year, Logan made an interesting trip north thru bandit country to care for an old lady whose leg was broken. He has had several one-day mountain climbing and exploring trips, too.

For Mamie-Lou (Logan writing) there is a big job from dawn to night. In addition to keeping household, home and clothes together, one of the jobs is school. Eleanor and Loretta are in the third and second grades, and little Logan insists on learning his alphabet and various other items. Part of one room is curtained off into a nice school room with blackboard and three small desks. There are eleven other foreigners, British and American, in the faculty family, but no other foreign children, so ours is a private school. Coming through Shanghai, we bought text books for the first three grades, but they went up in smoke on our truck near Mandalay a major loss. Such books can't be purchased in Free China. We ordered again, but this batch was still in Rangoon or Lashio when the Japanese came into Burma. Mamie-Lou was carrying on with odd books and typewritten copies from kind friends in other provinces when we had a windfall. The May panic broke up a little American school in Tali, most of the children went home to U.S.A., and their small but adequate supply of books fell into our laps. It even

included such treasures as a Book of Knowledge (encyclopedia for children) and art and science books of up-to-date vintage. Marvelous luck, put to maximum use by a first-rate teacher-mother. Daddy supplements a bit each morning before breakfast; music lessons on a little collapsible organ purchased in Hongkong (one of our most prized possessions), and Chinese lessons twice a week.

There is much else we would like to write about; of China's politics and progress; of the war and our direct relation to it; but we do not wish inadvertently to give away "state secrets", nor would the censor. You will understand. Suffice it to say that we are very happy to have our little home open occasionally to Americans from the forces: some under emergency conditions, some on routine jobs. One day these interesting incidents can be told. We can say that in February, news came that our home in Wuchang, occupied China, had been completely looted by Japanese, including our wedding presents; library also gone. Meanwhile there are every day jobs. Mamie-Lou has helped many mothers with their new babies, and their layettes. Clothes are a real problem here. She has nursed some mothers in hospital. She has started a Sunday school for the Chinese children of our faculty: quite an undertaking, and well worth while. There is much sewing and mending. Sometimes we lead in daily college chapel services and Logan preaches in Sunday chapel. He taught a class in Public Health last year; First Aid this year. All of us are trying to help make the principles of Moral Rearmament, so needed everywhere, to become a vital part of the life here.

Forgive our not signing this. We think of each one of you as we mail it. It is being printed and sent out through the kindness of headquarters: Church Missions House, 281 Fourth Ave., New York. Incidentally, letters addressed to China come through regularly now, even ordinary mail, though Air Mail is quicker. Do write us of yourselves.

MAMIE-LOU AND LOGAN ROOTS

# Military News

In the October BULLETIN we published our first Military List (475). The following names have been received since that time (239). Additional news received since this list was completed will be published in April. We would appreciate additions and corrections.

(An asterisk denotes change in rank or station).

1901

Capt. Robert E. Hoyt, Navy, U. S. Naval Hospital, Washington, D. C.

\*Col. David Townsend, Army, Army Induction Board, Bristol, Tenn.

1906

Dunlap P. Penhallow, Army

1908

Capt. William L. Mann, Jr., Navy, Navy Dept., Washington, D. C.

1909

Lt. Col. Daniel J. Hurley, Army, Fort Williams, Portland, Me.

1913

Comdr. Otto W. Grisier, Navy, Navy Dept., Washington, D. C.

Comdr. Irving W. Jacobs, Navy, Med. Inspector, Washington, D. C.

1916

Major Edward Harding, Army, Medical Centre, Washington, D. C.

Major William A. Perkins, Army

1917

Lt. Col. Frank D. Adams, Army, Hq. Fourth Service Command, Atlanta, Ga.

Lt. Col. Frank B. Berry, Army, Evac. Hosp. No. 9, A.P.O. No. 302, N. Y. C.

Capt. Arthur H. Dearing, Navy, Navy Dept., Washington, D. C.

Comdr. Rollo W. Hutchinson, Navy, Med. Inspector, Washington, D. C.

\*Major Monroe A. McIver, Army, Gen. Hosp. No. 33, Ft. Eustis, Va.

Capt. Robert P. Parsons, Navy, U. S. Naval Hosp., Pearl Harbor, Hawaii

\*Capt. Walter J. Pennell, Navy, U. S. Naval Hosp., Philadelphia, Pa.

1918

John R. Marshall, Navy

Major Eric P. Stone, Army, Lovell Gen. Hosp., Ft. Devens, Mass.

1919

Lt. Col. John Minor, Army, Walter Reed Hosp., Washington, D. C.

\*Lt. Comdr. William M. Shedden, Navy, Base Hosp., Canal Zone

1920

Frederick E. Cruff

David D. Greene, Navy



LT. COL. DONALD S. KING, '18

1921

Lt. Comdr. Charles B. Blaisdell, Navy, New Farragut Training Sta., Lake Pend d'Oreille, Idaho

Lt. Comdr. William N. Hughes, Navy, Naval Hosp., Newport, R. I.

\*Lt.-Col. Augustus Thorndike, Jr., Army, 105th Gen. Hosp.

1922

Lt. Comdr. Harry I. Bixby, Navy, Chelsea Naval Hosp., Mass.

Anthony M. Champ, Army

Capt. David H. Flashman, Army, Sta. Hosp., Camp Hulen, Palacios, Tex.

Capt. Moses Kopel, Army, Sta. Hosp., Camp Howzie, Tex.

\*Lt. Comdr. Walter S. Levenson, Navy

\*Lt. Comdr. Edward C. Smith, Navy

\*Comdr. Howard B. Sprague, Navy, Mobile Hosp. No. 6, %Postmaster, San Francisco

1923

Major Clarence E. Bird, Army, Aviation Med. Div., Preflight Sch., Kelley Field, Tex.

Lt. Comdr. William P. Davis, Navy, Naval Air Sta., Quonset, R. I.

Lt. Comdr. Mark L. Gerstle, Jr., Navy, Naval Training Sta., San Diego, Calif.

Capt. John D. Sheehan, Army, 709 M. P. Battalion, Putnam, Conn.

Lt. Comdr. Paul E. Spangler, Navy

Lt. Comdr. Frederick G. Thompson, Jr., Navy, Marine Corps in Pacific

Lt. Comdr. Shields Warren, Navy

\*Comdr. James C. White, Navy, Chelsea Naval Hosp., Mass.

1924

Plimpton Guptill, Army, Army Air Force

\*Lt. Comdr. Francis T. Hunter, Navy, Mobile Hosp. No. 6, %Postmaster, San Francisco

Lt. Comdr. J. Lester Kobacker, Navy, Naval Training Sta., Farragut, Ida.

Lt. Col. Herman A. Lawson, Army, Evac. Hosp.  
No. 48  
Major George C. Prather, Army  
Major Joseph Smith, Army, Manchester Air  
Base, Grenier Field, N. H.

## 1925

Lt. Comdr. Robert R. Baldridge, Navy, Base  
Hosp., Quantico, Va.  
Major Linn F. Cooper, Sta. Hosp., Drew Field,  
Tampa, Fla.  
Major William V. Cox, Army, 67th Gen. Hosp.,  
Ft. Bliss, El Paso, Tex.  
Comdr. James R. Fulton, Navy, Med. Inspector,  
Washington, D. C.  
\*Comdr. Henry W. Hudson, Jr., Navy, U. S. S.  
Wichita, %F.P.O., San Francisco  
Major Philip H. McCrum, Army, 67th Gen.  
Hosp., A.P.O. 3346, N. Y. C.  
Major Floyd R. Parks, Army, Vancouver Bar-  
racks, Wash.  
\*Lieut. Joel J. Pressman, Navy, Naval Sch. of  
Aviation, Pensacola, Fla.  
Joseph W. Tiede, Army

## 1926

Major Burdette J. Buck, Army  
Capt. Henry R. Butler, Jr., Army, Sta. Hosp.,  
Ft. Huachuca, Ariz.  
Lt. Comdr. Frank B. Littlefield, Navy, Norfolk  
Naval Hosp., Portsmouth, Va.  
\*Lt. Col. John W. McKoan, Jr., Army, Hq. 16th  
Med. Reg., A.P.O. No. 302, N. Y. C.  
Lt. Comdr. John M. Porter, Navy, 2nd Con-  
struction Btn., Marine Corps, %Postmaster,  
San Francisco  
\*Lt. Comdr. Theodore C. Pratt, Navy, with  
Marines in Solomons  
Lt. Comdr. James S. Rooney, Navy  
Raymond J. Savage, Navy  
\*Comdr. Benjamin Tenney, Jr., Navy, U.S.S.  
Argonne, F.P.O., San Francisco

## 1927

Frank B. Carr, Navy  
Major William P. Farber, Army, Sta. Hosp.,  
Camp Blanding, Fla.  
\*Lt. Col. James E. Fish, Army, Tripler Gen.  
Hosp., A.P.O. No. 958, San Francisco  
Sherman E. Golden, Navy, Naval Hosp., Chel-  
sea, Mass.  
Major Gilles E. Horrocks, Army  
\*Lt. Col. Alexander Marble, Army  
Lt. Comdr. Carl H. McMillan, Navy, Bureau  
of Med. & Surgery, Washington, D. C.  
John B. Sears, Army

## 1928

\*Lt. Comdr. Gaylord S. Bates, Navy, U.S.S.  
American Legion, F.P.O., San Francisco  
Greydon G. Boyd, Navy  
Lt. Comdr. Allen G. Brailey, Navy, Naval  
Hosp., Norfolk, Va.

\*Lt. James J. V. Cammisa, Navy, Naval Med.  
Corps Yard Dispensary, Boston  
Major Ira M. Dixon, Army, Air Force Officer's  
Training Sch., Miami Beach, Fla.  
Lt. Comdr. Hermann F. Engelbach, Navy, Naval  
Hosp., Norman, Okla.  
\*Lt. Comdr. Ralph E. Fielding, Navy, U. S. S.  
Rochambeau  
Capt. John S. Hathaway, Army, Army Air  
Force  
\*Lt. Comdr. Robert J. Joplin, Navy, Chelsea  
Naval Hosp., Mass.  
Capt. Clyde H. Landers, Army, Sta. Hosp., Camp  
San Luis, Obispo, Calif.  
\*Lt. Comdr. Patrick J. Mahoney, Navy  
Lt. Comdr. Bishop L. Malpass, Navy, U. S. S.  
Patoka  
Lt. Comdr. Jacob L. Rudd, Navy  
Capt. Giles W. Thomas, Army, Ft. Devens,  
Mass.

## 1929

Major John E. Brown, Jr., Army, Camp Camp-  
bell, Ky.  
Lt. Comdr. Robert H. Goodwin, Navy, U. S.  
Naval Dispensary, Washington, D. C.  
\*Lt. Comdr. Sidney C. Graves, Navy, Chelsea  
Naval Hosp., Mass.  
Olin C. Hendrix, Navy  
\*Major Gilbert T. Hyatt, Army, Ft. Devens,  
Mass.



LT. COMDR. JOHN P. MONKS, '28  
with DR. WILLIAM WOODS  
of the Harvard Hygiene Dept.





MAJOR WILLIAM J. COX, '25

Capt. William L. Leet, Army, Evac. Hosp. No. 48.

Lt. Comdr. Roy E. Mabrey, Navy, Chelsea Naval Hosp., Mass.

Lt. Albert E. Morris, Navy, Navy Recruiting Sta., Providence, R. I.

Major Edward Parnall, Army

Capt. Herbert Sherwin, Army

David B. Snelling, Army

\*Major Edward G. Thorp, Army, Sta. Hosp. No. 160, Ft. Storey, Va.

1930

\*Lt. Col. Benjamin M. Banks, Army, Medical Centre, Washington, D. C.

Phillips L. Boyd, Army

Lt. Allan S. Chrisman, Navy, Bureau of Med. & Surgery, Washington, D. C.

\*Lt. Col. Richard Collins, Jr., Army, Hq. 87th Inf., Camp McCain, Miss.

\*Lt. Col. Eugene C. Eppinger, Army, 105th Gen. Hosp.

\*Lt. Comdr. Ashton Graybiel, Navy, Naval Air Sta., Pensacola, Fla.

Lt. Comdr. Snowden C. Hall, Jr., Navy, Naval Hosp., Key West, Fla.

Major Harold H. Hamilton, Army, Sta. Hosp., Westover Field, Chicopee Falls, Mass.

\*Capt. Henry F. Howe, Army, Camp Kilmer, N. J.

\*Lt. Hugh Montgomery, Navy, U.S.S. Solace, F.P.O., San Francisco

Capt. Lewis S. Pilcher, Army, Ft. McPherson, Ga.

Capt. John J. Poutas, Army, Hq. Fourth Service Command, Atlanta, Ga.

William H. Snyder

\*Lt. Philip Solomon, Navy, Naval Training Sta., Newport, R. I.

Lt. Harry M. Spence, Army, Moffatt Field, Calif.

\*Capt. Luther M. Strayter, Jr., Army, 39th Gen. Hosp., A.P.O. 3284, San Francisco

Capt. David W. Wallwork, Army, Base Hosp., Air Transport Command, Presque Isle, Me.

1931

\*Lt. Richard E. Alt, Navy, Chelsea Naval Hosp., Mass.

\*Lt. Comdr. Henry J. Bakst, Navy, Newfoundland

\*Capt. Charles H. Bradford, Army, 2nd Sta. Hosp., Australia

\*Major Morton G. Brown, Army, Sta. Hosp., Ft. Devens, Mass.

Capt. Kenneth G. Burton, Army, Post Hosp., Camp Breckinridge, Ky.

Capt. Francis H. Chafee, Army, 160th Gen. Hosp., Ft. Storey, Va.

\*Capt. Richard J. Clark, Army, 160th Gen. Hosp., Ft. Storey, Va.

John S. Donaldson, Army, 27th Gen. Hosp.

\*Lt. Comdr. Dana L. Farnsworth, Navy, U.S.S. Solace

\*Lt. Walter E. Garrey, Navy

Lt. Comdr. Archibald G. Gauld, Navy, U.S.S. Chereango

Major James C. Harberson, Army

Frederick Kellogg, Army

\*Lt. Comdr. Harrison E. Kennard, Navy, Mobile Hosp. No. 6, %Postmaster, San Francisco

Capt. Samuel B. Kirkwood, Marine Corps

George S. Krinsky

\*Lt. Comdr. Richard L. Pearse, Navy, Naval Dispensary, Key West, Fla.

\*Lt. Comdr. Robert S. Schwab, Navy, Chelsea Naval Hosp., Mass.

\*Lt. Edwin Vieira, Navy, Naval Air Base, Quonset, R. I.

\*Lt. John J. Wells, Navy

1932

Capt. John C. Angley, Army, Army Air Force

Capt. Nathaniel E. Beaver, Army, Camp Robinson, Ark.

\*Capt. Edward Budnitz, Army, Sta. Hosp., Ft. Devens, Mass.

Major Frank B. Cutts, Army, 48th Evac. Hosp.

\*Lt. Alfred L. Duncombe, Navy, Mobile Hosp. No. 3

\*Lt. Comdr. John B. Dynes, Navy, Nat'l. Naval Med. Centre, Bethesda, Md.

Lt. Marcus E. Farrell, Navy, Naval Air Base, Jacksonville, Fla.



Lt. Seebert J. Goldowsky, Army, Camp Shelby, Miss.

\*Capt. George E. Heels, Army, Recruiting & Induction Sta., Portland, Me.

Capt. Walter S. Jones, Army

Henry J. Oberson, Army

\*Capt. Leslie H. Van Raalte, Army, Army Air Force, St. Petersburg, Fla.

Francis H. Reynolds, Army

Charles E. Walker, Jr., Army

1933

Lt. Frederick D. Ames, Navy, Recruiting Sta., Fed. Bldg., Little Rock, Ark.

Capt. George B. Beaman, Jr., Army

Louis B. Benjamin, Navy

Major Reeve H. Betts, Army, Lawson Gen. Hosp., Atlanta, Ga.

William F. Green, Navy

Ralph L. Hawkins, Army

Capt. Henry A. Kind, Army

Lt. John W. Martin, Jr., Navy, Great Lakes Naval Training Sta., Chicago, Ill.

Major Francis Murphey, Army, 300th Gen. Hosp., Camp Forest, Tenn.

\*Capt. Christopher G. Parnall, Jr., Army, 19th Gen. Hosp., Camp Livingston, La.

Lt. Joseph C. Placac, Jr., Navy, Naval Hosp., Great Lakes, Ill.

Lt. (jg) William F. Queen, Navy

Artemas J. Stewart

Lt. Daniel J. Sullivan, Navy, Naval Air Sta., Elizabeth City, N. H.

Capt. Elliott T. Thieme, Army, 298th Gen. Hosp.

Capt. Leo Walzer, Army, Australia

\*Capt. Alfred A. Weinstein, Sta. Hosp., Ft. McKinley, P. I.

Capt. Charles S. Whelan, Army, 43rd Sta. Hosp., Camp Blanding, Fla.

\*Capt. John W. Zeller, Army, 160th Sta. Hosp., Ft. Storey, Va.

1934

Lewis N. Adams, Army

\*Major George Austen, Jr., Army, 105th Gen. Hosp., A.P.O. 923, San Francisco

Lt. Robert H. Barker, Navy, Off. of Naval Officer Procurement, Nashville, Tenn.

Capt. John S. Dziob, Army, Evac. Hosp. No. 48

Lt. John G. Fleming, Navy, Alaska

Lt. David Freedman, Army, 110th Sta. Hosp., Camp Rucker, Ala.

\*Capt. John R. Graham, Army, 160th Gen. Hosp., Ft. Storey, Va.

William A. Jarrett, Army

Octa C. Leigh, Jr., Army

\*Samuel F. Martin, Navy

Lt. Edwin B. McLean, Navy, Naval Air Sta., Pensacola, Fla.

Capt. Aage E. Nielsen, Army, Ft. McCoy, Wisc.

Norbert W. Scholle, Army



LT. DANIEL J. SULLIVAN, '33

Edgar M. Scott, Jr., Navy

Lt. Clarke Staples, Army, Army Air Force

\*Capt. Howard I. Suby, Army, 160th Gen. Hosp., Ft. Storey, Va.

\*Major Garrett L. Sullivan, Jr., Army, 160th Gen. Hosp., Ft. Storey, Va.

Lt. John J. Thornton, Navy

Frederic Tudor

\*Capt. Thomas A. Warthin, Army, Air Force, Westover Field, Mass.

\*Capt. Richard G. Whiting, Army, 160th Gen. Hosp., Ft. Storey, Va.

Capt. John C. Wilcox, Army, Santa Ana Air Base, Calif.

Lt. Jack W. Wolf, Army, 64th Med. Reg., Camp Bowie, Tex.

Capt. Louis Zetzel, Army, Sta. Hosp., Camp Berkeley, Tex.

1935

Lt. Otto E. Billo, Navy

Capt. David H. Clement, Army, 23rd Gen. Hosp., Ft. George Meade, Md.

William E. Dawson, Navy

Lt. Robert Dutton, Army

\*Major Henry M. Greenleaf, Army, Hospitalization Branch Plans Div., Arlington, Va.

Arthur J. Hadler, Army

Capt. Russell B. Hanford, Army, Sta. Hosp., Army Air Base, Sioux City, Iowa

Edward C. Holscher, Army

Capt. James F. Jones, Army, Sta. Hosp., McDill Field, Tampa, Fla.

Capt. Owen S. Ogden, Army, Camp Atterbury, Ind.

Cornelius Olcott, Jr., Army, Air Force, Kelly Field, Tex.

Lt. Warren M. Poland, Navy, Naval Training Sta., Sampson, N. Y.

Albert E. Rauh, Army

Capt. Ralph D. Richardson, Army, Carlisle Barracks, Pa.  
 Capt. Charles D. Roberts, Army  
 Rex. L. Ross, Jr., Navy  
 John J. Shields, Army  
 \*Capt. Oscar S. Staples, Jr., 160th Gen. Hosp., Ft. Storey, Va.  
 \*Capt. Sam M. Talmadge, Army, Lawson Gen. Hosp., Atlanta, Ga.

## 1936

\*Capt. Noyes L. Avery, Jr., Army, Barnes Gen. Hosp., Vancouver Barracks, Wash.  
 \*Capt. Theodore B. Bayles, Army, Lovell Gen. Hosp., Ft. Devens, Mass.  
 Capt. Irving A. Beck, Army, Evac. Hosp. No. 48  
 \*Lt. Stanley Bennett, Navy  
 Lt. Palmer Congdon, Army, Evac. Hosp. No. 48  
 Lt. Robert W. Drew, Army, 91st Infantry, A.P.O. 1058  
 Capt. Dwight E. Harken, Army, Walter Reed Hosp., Washington, D. C.  
 Major John P. Hubbard, Army  
 Robert R. Levin, Army, 29th Field Hosp., Camp Campbell, Ky.  
 Capt. George M. Pike, Army, Ft. Dix, N. J.  
 Capt. Robert L. Richards, Army, Sta. Hosp., Edgewood Arsenal, Md.  
 \*Lt. Harald A. Smedal, Jr., Navy, Dispensary, Naval Air Sta., Pensacola, Fla.  
 William H. Sweet, England  
 \*Capt. Howard Ulfelder, Army, 160th Sta. Hosp., Ft. Storey, Va.  
 Capt. Paul M. Zoll, Army, Camp Barkeley, Abilene, Tex.

## 1937

\*Edward A. Bachhuber  
 Lloyd T. Bell, Army  
 \*Major John A. Booth, Army, Sta. Hosp., A.P.O. 825, %Postmaster, New Orleans, La.  
 Capt. Robert E. Brownlee, Army, 7th Gen. Hosp.  
 Lt. Charles M. Campbell, Jr., Army, 11th Evac. Hosp.  
 Capt. Sidney Cohen, Army, Ft. Meade, Md.  
 Lt. John H. Crandon, Navy, Naval Supply Corps Sch., Harvard Univ., Boston  
 Lt. David P. Dutton, Army, Ft. Lewis, Wash.  
 Capt. George F. Emerson, Army, Air Force, Sta. Hosp., San Antonio, Tex.  
 \*Lt. Henry B. Garrigues, Army, 12th Armored Div., Camp Campbell, Ky.  
 Lt. (jg) Roald N. Grant, Navy, Naval Med. Sch., Washington, D. C.  
 Lt. Lloyd E. Hawes, Army  
 Capt. Joseph W. Johnson, Jr., Army, 300th Gen. Hosp., Camp Forest, Tenn.  
 John S. Lyle, Army  
 Daniel L. Mooney, Army



LT. HERBERT T. LEIGHTON, '38

Capt. Emanuel B. Schoenbach, Army  
 Lt. (jg) Lewis Thomas, Navy  
 Henry H. Work, Jr., Army, Buffalo Unit

## 1938

Arthur L. Abrams, Army, 23rd Air Depot Group, McClellan Field, Sacramento, Calif.  
 Lt. Fred H. Allen, Jr., Army, Air Force, Miami, Fla.  
 Lynn S. Beals, Jr., Navy, Portsmouth, N. H.  
 Lt. Edward R. Evans, Army  
 Capt. Lucio E. Gatto, Army, Mitchel Field, Long Island, N. Y.  
 Lt. Wooster P. Giddings, Army  
 \*Lt. (jg) Charles S. Hascall, Jr., U.S.S. McCawley  
 Lt. Benjamin L. Huntington, Army  
 Lt. (jg) Robert S. Hurlbut, Navy, Chelsea Naval Hosp., Mass.  
 \*Lt. (jg) Hunt B. Jones, Navy, F.P.O. 1105, San Francisco, Calif.  
 William D. Koon, Army  
 \*Capt. Frederic D. Lake, Army, Med. Dept., Ft. Devens, Mass.  
 \*Lt. Herbert T. Leighton, Navy, U.S.S. Tuscaloosa  
 Lt. (jg) Paul T. Moore, Navy  
 Lt. (jg) Richard D. Nies, Army  
 Lt. Herbert S. Sise, Navy, Solomon's Island, Ga.  
 \*Lt. Edward L. Smith, Marines, Guadalcanal  
 William K. Swann, Jr., Army, Camp White, Medford, Ore.  
 Capt. Joseph E. Warren, Army, Camp Shelby, Miss.  
 \*Lt. (jg) John L. Wilson, Navy, No. 1105, F.P.O., San Francisco

1939

- \*Lt. Eben Alexander, Jr., Army, Sta. Hosp., Sheppard Field, Wichita Falls, Tex.
- \*Capt. Victor G. Balboni, Army, Air Force, A.P.O. 859, N. Y. C.
- Charles F. Begg, Army
- Lt. Alexander H. Bill, Jr., Army, Ft. Devens, Mass.
- \*Lt. Donald F. Brayton, Army, Lovell Gen. Hosp., Ft. Devens, Mass.
- \*Lt. William T. Carleton, Navy
- Robert V. Cleary, Army
- Lt. James E. Conley, Navy, Naval Construction Btn., No. 69, Camp Peary, Williamsburg, Va.
- \*Lt. (jg) Vincent P. Dole, Jr., Navy
- Lt. Edward C. Dyer, Navy
- \*Lt. Daniel S. Ellis, Army, Medical Centre, Washington, D. C.
- James M. Geiger, Army
- Lt. Richard H. Grogan, Army, Sch. of Aviation Medicine, Tex.
- John F. Hardham, Army
- Lt. (jg) Edward T. Haslam, Navy, U.S.S. Denebola
- Lt. Robert S. Hormell, Army, 27th Sta. Hosp., % Postmaster, San Francisco, Calif.
- \*Lt. Ferdinand F. McAllister, Army
- William M. McGaughey, Navy
- Arthur A. Nichols, Army
- \*Lt. (jg) John F. Roach, Navy
- John A. Sims, Army
- Capt. Thomas W. Smith, Army, Hq. Squadron, I Air Support Command, Morris Field, Charlotte, N. C.
- \*John B. Stanbury, Navy, U.S.S. Milwaukee
- John B. Truslow, Navy
- Lt. Walter I. Tucker, Navy, Naval Air Sta., Pensacola, Fla.

1940

- Lt. James C. Allanson, Army, Sta. Hosp., Walnut Ridge, Ark.
- Julius W. Bell, Navy
- Stanley J. Boguniecki, Navy
- Lt. (jg) Robert H. Bradley, Jr., Navy, Aviation Base, Anacostia, D. C.
- Lt. Richard P. Caddick, Navy, U.S.S. Reid, % Postmaster, San Francisco.
- Franklin C. David
- Lt. (jg) Archibald S. Deming, Navy, Unit 565, % Postmaster, San Francisco.
- Lt. Edward G. Deming, Army, 312th Field Artillery Battalion
- Robert F. Farrington, Navy
- Capt. Stephen Fleck, Army, Camp Shelby, Miss.
- Lt. Walter A. Gunkler, Army
- Lt. Nelson Hastings, Army, El Paso Gen. Hosp., Tex.

- \*Lt. Charles H. Herndon, Army, 3rd Sta. Hosp., A.P.O. 505, N. Y. C.
- \*Nicholas H. Holmes, Army, Truan Field, Madison, Wisc.
- Lt. Lawrence Kilham, Army
- Lt. (jg) Lawrence C. Kingsland, Jr., Navy
- Lt. Rodney C. Larcom, Jr., Sta. Hosp., Maxwell Field, Ala.
- Theodore L. Lytle, Army
- Lt. Edward C. Malewitz
- Lt. Leon H. Manheimer, Army, Lovell Gen. Hosp., Ft. Devens, Mass.
- Lt. Allan S. Mirken, Post Surgeon's Office, Port of Embarkation, San Francisco
- \*Lt. (jg) John M. Morris, Navy, No. 8170, F.P.O., N. Y. C.
- John C. Patterson, Army
- Lt. (jg) Thomas Paull, Navy, U.S.S. Arcturus
- Lt. Thomas Perry, Jr., Army, 48th Evac. Hosp., APO 3492, New York City
- Lt. Arnold Porter, Army
- Bernard Rapoport, Army, Med. Det., Grenier Field, Manchester, N. H.
- Lt. Stewart P. Seigle, Navy
- Lt. (jg) Bruce M. Shepard, Navy, at sea
- Lt. James H. Thompson, Army, Gen. Hosp. No. 30, APO 514, New York.
- Lt. (jg) Earle H. Webster, Navy, U. S. Marine Unit No. 1175, % Postmaster, San Francisco
- Lt. Thomas H. Weller, Army
- Lt. William A. White, Jr., Navy
- Lt. Hrad H. Zooloomian, Army, Ft. Devens, Mass.

1941

- Lt. Milton L. Berg, Army, Air Force
- Lt. (jg) Edgar A. Bering, Jr., Navy, Chelsea Naval Hosp.
- Franklin Carter, Army
- Lt. Stephen M. Clement, Army, Moore Gen. Hosp., Swannanoa, N. C.
- Lt. (jg) William P. Constable, Navy
- Lt. Perry J. Culver, Army, Air Force, Miami, Fla.
- Lt. Milton Elkin, Army, Air Force, Miami, Fla.
- Lt. (jg) Robert B. Hallborg, Navy
- Lt. (jg) Henry K. Heller, Navy, overseas
- Lt. John Homans, Jr., Army, Air Force, Miami, Fla.
- Lt. Herbert C. Moffit, Jr., Navy
- Lt. (jg) Julian Nieckoski, Navy
- Lt. Howard W. Pierce, Navy, Naval Air Sta., Newfoundland
- Lt. (jg) Woodman B. Pomeroy, Navy
- Lt. John W. Raker, Navy
- \*Lt. (jg) Joseph Rogers, Navy, U.S.S. Abner Read

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 Boston, Mass.

## EDITORIALS

Alumni will soon receive the annual request of the Association for funds. It should be emphasized that the BULLETIN and the other activities of the Association (sickness benefits to needy students, scholarships, maintenance of a central office, etc.) are entirely supported by the voluntary contributions of the alumni body. We receive no subsidy from the Medical School. The BULLETIN is sent free of charge to all alumni and it is only partially supported by advertising. If every graduate of Harvard Medical School gave only two dollars we would triple our income of last year, we could make the BULLETIN more complete and interesting, and we would be of more service to the School.

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The question of admitting women students to the Harvard Medical School was brought to light during the last war and it is being aired again in this one, so that there is real point to the article by Dr. Fitz on page 30. The struggle to admit women in the Johns Hopkins Medical School has

been well described in the recent biography of William Welch. Welch seemed neutral about the question and Osler was against it. Although early experiments at the Hopkins were a failure, subsequent experience has justified admitting women students to that institution. The autobiography of Alice Hamilton which is appearing in the Atlantic Monthly seriously raises the issue of equal opportunity for men and women in medical education.

There are many obvious practical difficulties in admitting women to Harvard Medical School. Certainly additional endowment would be necessary. The arguments for such a step are not as clear as they are for some other questions, for example that of raising standards in dental education. Nevertheless, there seem to be no insurmountable obstacles, and those that object to medical education for women at Harvard seem to be on the losing side.

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The National Research Council has prepared a therapeutic manual for the War Department.\* Various committees of the Division of Medical Sciences of the National Research Council contributed to the manual and the material was edited by R. N. Nye of the Committee on Information. Final compilation was conducted by the pertinent divisions of the Office of the Surgeon General, U. S. Army. This booklet contains concise but quite complete, factual information for treatment in surgical and medical emergencies, venereal diseases, certain infectious diseases including tropical diseases. It should prove a handy text not only for medical officers of the armed forces but for civilian doctors.

\*Guides to Therapy for Medical Officers, U. S. Government Printing Office, Washington, 1942. Obtainable from the Superintendent of Documents, Washington, D. C., Price 25 cents.



### PRESIDENT LOWELL

President A. Lawrence Lowell died in his Marlborough Street house in Boston in the early morning of January 6. He had been failing for several months, but the illness preceding his death was of short duration. He was 86 years old. His going marks the end of an era. Services held in Harvard Memorial Church in the Yard were attended by a distinguished gathering.

President Conant said in regard to his great predecessor: "All who knew Mr. Lowell realized that his decisions were based on a deep understanding of the historic role of a university as a free community of scholars. He had faith that universities would endure so long as they were essential to a developing civilization. To make Harvard a college and a university which would continue to contribute to human welfare and to give youth a strong, active intellectual life, he devoted twenty-four years of a selfless career."

### MEDICAL SCHOOL NOTES

Should anyone doubt that the Medical School is playing an important part in the war effort, let him consider the large role it has played so far. At present more than 200 men from the faculty have entered the armed forces of the United States. Three United States Army General Hospitals are staffed, wholly or in part by members of the faculty: the 5th (now in Ireland), the 105th (in Australia), the 6th (the M. G. H. Unit). In addition many members are on the staff of the 7th General Hospital (the B. C. H. Unit, expecting to be called soon). In the summer of 1940 the Harvard Public Health Unit was founded under the direction of Professor Gordon. It soon became allied with the American Red Cross to form the American Red Cross-Harvard Hospital, and was set up as a running concern in Salisbury, England. On July 15, 1942 it was turned over to the U. S. Army (see the last BULLETIN).

Here at home nearly all departments of

the School have contracts to conduct essential research, and new contracts continue to be received. This work extends to many affiliated hospitals. The whole story of this interesting work will have to await the close of the war. Necessarily much of the medical research is non-dramatic, but some of the work has already shown its immediate use.

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The most important item of School news is the filling of the post left vacant by the retirement of Walter B. Cannon, George Higginson Professor of Physiology. The new incumbent, a happy choice, is Eugene Markley Landis, Professor of Medicine of the University of Virginia.

The medical times are such that rigid barriers between departments of our discipline are down and the chair of physiology can be filled by an internist. This is rather new. It is not new, of course, that Harvard should seek elsewhere than Boston for the best teachers that can be attracted to it.

Although Dr. Landis is an internist most of his researches have been essentially physiological in nature or have concerned basic physiological principles in medical conditions. The life work of a man is often indicated in the first papers he has written: Dr. Landis' first paper was on the tonic effect of the sympathetics on the ocular blood vessels, indeed less clinical than some of Dr. Cannon's early work with x-ray and the intestinal tract. With the exception of a scattering of clinical notes on certain diseases, the writings of Dr. Landis mainly have to do with studies of the vascular mechanism in clinical medicine and the pharmacotherapy in this field. There are over 50 titles in his bibliography.

Eugene Markley Landis, who was born in 1901, is the holder of four degrees from the University of Pennsylvania. He interned at University Hospital, Pennsylvania. In 1931 he was Associate in Medicine, University of Pennsylvania; in 1934 Assistant Professor; in 1940 Professor of Medicine, University of Virginia. He was

awarded the John Phillips Memorial Medal by the American College of Physicians in 1936.

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Thanks are due to alumni for their very fine response to Dr. Burwell's appeal for microscopes for the students, who have been unable because of present conditions to purchase them. The School has on hand sufficient microscopes to take care of the class entering in March of this year. It is not planned to accumulate any more microscopes at present, because the Army and Navy program may not render this necessary. Most of the microscopes have been loaned by alumni, and the School has purchased a few. They have been put in good order and insured.

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Immediately following the Cocoanut Grove disaster, the Medical School released many students to work at hospitals. These men did yeoman duty for several days and nights. Undergraduates of Harvard College, many of them premedical students, serving as temporary orderlies in hospitals, had an unusual experience. One cannot estimate yet what good may come out of this terrible accident, in which nearly 500 people lost their lives, but great interest was aroused in Boston in the discussion of methods of treatment of burns. Opportunity was given for important research both in this line and in the effect of noxious gases.

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Recently, a curious rumor swept through the School so absurd that it deserves to be set down among the lore and fancy of our venerable institution. The U. S. Army was to take over the Medical School, lock, stock and barrel. Mr. Rider, expert keeper of the buildings, received on his desk a neatly typewritten and official-looking notice. He unlocked the Bulletin Board and posted it, thus clinching the matter. In addition to describing how the Army would take upon itself the troubles of the School (which would be well enough if the Army could run things better), it made the infamous

statement that members of the Naval Reserve would be promptly transferred to Yale!

Needless to say the hoax was discovered in time. The School, indeed, may gradually assume a martial enough appearance in the near future. The Collegiate Training Program now under discussion by Army or Navy provides that medical students may be placed under Army or Navy discipline and in uniform.

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There is a bromide called "Time will tell" so old and unpalatable that no one can stomach it. But time has told on two prominent members of the teaching staff: Joseph Aub and Paul White. Their sins have finally caught up with them. The story is told in reminiscences of two girls, who once took the grand tour.\* Then they were lush things in the bright days of the early 1920's, now, we trust, dependable creatures. They met on the boat two presentable young doctors, Joseph Aub and Paul White who seemed to turn up at the most useful times and endeared themselves to the young ladies forever afterwards. It seems that Miss Skinner came down with measles on the voyage, after exposing everyone on the boat, particularly a young Princeton man, whom we hope (but are not told) came down with a very bad case later on. The two young doctors gallantly entered into the conspiracy and assisted Miss Skinner to escape the British quarantine officials and to recover in safety at her hotel in Southampton. Miss Skinner, Miss Kimbrough and the two doctors have lived to prove their worth, and it wasn't our intention to point the finger at the extremely unethical behavior of Dr. White and Dr. Aub. The real pith of the story is that Dr. Aub and Dr. White diagnosed a case of measles before the rash appeared and we are proud of that fact. It was measles of course, although we haven't checked on the story.

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\*Our Hearts Were Young and Gay, By Cornelia Otis Skinner and Emily Kimbrough, Dodd, Mead & Company, New York, 1942. (\$2.50).

# News from the Front

DEAR MRS. WILSON:

Thanks for your letter. You are certainly entitled to a report from your absentee treasurer. It is impossible to incorporate in one letter a complete account of the activities of the 6th General Hospital during our seven months stay here at Camp Blanding, but I will try to give you a few of the highlights.

As you know, the amount of professional work that we have had here is limited, but there seems to be quite a lot to learn about the difference between a civilian in a new uniform and something at least vaguely resembling an officer in the Army Medical Corps.

The steps in our training have been numerous and varied. We have learned to drill and by constant practice we can maintain a degree of precision which we consider gratifying. Twice a week we go out cross country with full field equipment and can get over the required number of miles without undue ill effects.

We have been taught as much about the organization and operation of a military hospital of this type as can be done until we have one of our own to run. This involves a number of problems that the professional staff of a civilian hospital has nothing to do with and knows nothing about. We have also learned something about other types of units in the Medical Department and about the basic organization of certain of the combat units.

We have had elementary courses in such things as field sanitation, chemical warfare, military law, map reading and aerial photography. One of the things that we enjoyed most was some instruction in the care and use of the Garand rifle, ending up on the range where we tried our hands at slow and rapid fire. Not all of us proved to be born marksmen.

One of the tank regiments took us out and gave us all a ride. They can have that job, I'll stick to doctoring. Also one of the field artillery outfits gave us a very interesting afternoon watching them fire, and

we have seen some excellent demonstrations of camouflage techniques.

Perhaps most valuable of all, we have had an opportunity to organize a fairly comprehensive teaching program for the men of our Medical Detachment. These soldiers will work on the wards of our hospital and in the operating rooms and we were fortunate in getting an exceptionally good crowd of men. Some of them are from Boston and vicinity, many from western New York State and others from points scattered all over the country. They have taken to the training program with a will and we expect this to pay big dividends later.

Enclosed are a few snap shots showing some of our routine camp activities. I think you will recognize a number of familiar faces.

MARSHALL K. BARTLETT, '28,  
Major, M. C.

Camp Blanding.

(Dr. Bartlett is Treasurer of the Alumni Association on leave of absence.)

DEAR DR. HALE:

Unfortunately, it has been some time since I have had the pleasure of being in Boston and of seeing you. I thought that you might be interested in my course since then.

Upon the completion of my fellowship at the Mass. General in March 1941, I went on to my internship at Mount Sinai in New York, as you know.

My only claims to fame during my Sinai interlude are based upon a publication in *The American Journal of the Diseases of Children*, and the birth of a son, now almost eight months of age. For the latter production, however, I must share a considerable part of the authorship with my wife.

I was just about to enter the last, (and most valuable), third of my appointment at Sinai when the War Department decided to take up its option on my 3½ year old reserve commission. On May 27 I



reported for duty at Lawson General Hospital in Atlanta, Georgia, accompanied by my wife and shiny new son. Here I was "promised" 6 months as ward officer on the Neuro-psychiatric service, a 6 months course in psychiatry under Col. Ernest H. Parsons (whom I found a very pleasant and inspiring teacher), three months in Neurology at the Mayo Clinic (this I was offered within a week after arrival, but was advised by the Colonel to postpone for 3 months for personal reasons), then classification as a Neuro-psychiatrist, promotion to a Captaincy and transfer to a service of my own with one of the new general hospitals. But this was never to be more than just a plan.

As a result of my experience in biochemical research, on July 1, I was ordered to Camp Rucker, Alabama, as Chemist to the 8th (Army) Medical Laboratory. We took this blow with considerable fortitude, found suitable living quarters 50 miles from Camp (after a long hunt), and were just settled when the laboratory was ordered for permanent station to Fort Sam Houston, Texas. These orders, however, were very happily received, for living conditions in south-eastern Alabama were not very pleasant, particularly for the baby. Fort Sam is reputed to be one of the finest posts in the land. But once again fate was to interfere. A few days before we were to leave for Texas, the Battalion Surgeon of the organization I am now with was found to be physically unfit because of hypertension. My unit was called upon to provide a replacement; and since I was the junior officer, I was the chosen one. This unit had orders to proceed overseas in 48 hours. A little less enthusiastically this time, my wife and I unpacked our belongings in order to pack them separately, made arrangements for her and the baby to return to New York, and bade each other farewell. A rapid journey deposited me in the Hawaiian Islands, where I have been stationary (*mirabile dictu*) for over a month.

We are very comfortably stationed at a permanent post here, one of the best in the

Army. I am the Commanding Officer of the Battalion Medical Detachment, consisting of three officers and 15 enlisted men. Promotion should follow within a few months if I am not transferred out again. At present we assist in the operation of a large Medical Dispensary. We have the advantage of having a general hospital near at hand, and thus are able to follow the more interesting of the patients we send in. In fact, if I had my family with me, I could find very little fault with my present position.

Nevertheless, since I knew that the Army was very much in need of medical officers with some chemical training, I recently visited Col. Green, who is Director of Laboratories for the Hawaiian Department. He confirmed the shortage of laboratory personnel, told me that he would see the Department Surgeon (Col. King) about getting me for his service. I expect orders to one of the local general hospital laboratories in the near future, therefore.

I understand that Harvard has now contributed two units of its own, and a large part of the personnel of the Boston Hospital units. What with the acceleration in the medical course, the burden on those who remain must be tremendous.

Although I fear a long conflict, I still hope that not many moons will intervene before we meet again on familiar soil.

NATHANIEL B. KURNICK, '40.

DEAR MRS. WILSON:

If I hadn't often thought of writing you and if the matter hadn't weighed more than a little on my mind, I would probably not be throwing this answer to your last letter back so quickly. I have been anxious to know something of what my classmates and friends in other classes are doing now in and out of the Service. Needless to say the last ALUMNI BULLETIN containing as complete a list of the men in the army and navy as you could obtain was most welcome. I would imagine that there are many more from the class of 1939 in the armed forces, but unfortunately I am not in a very good



position to give you any specific information on that point.

Since I came in the army almost nine months ago, I have been stationed at Sheppard Field in the station hospital there. It is a very large hospital, one of the largest in the air force, and I have had a great many interesting experiences as well as a considerable amount of good fortune. I have had a chance to continue doing surgery and neurosurgery just as I had been doing at the Brigham and Children's Hospitals. When I first came here, the hospital was new and very badly equipped and staffed. In the course of the last few months it has become very well staffed and equipped and work has been most satisfactory. I have hopes of doing neurosurgery in the army, possibly of going for awhile to a neurosurgical training center within a few weeks and then to more active combat zones.

It is true that I have married since I came into the army and I did marry "the Major's daughter". She was Miss Betty West, the daughter of Dr. Leonard West of Des Moines, Iowa, later Major West of the Army Medical Corps stationed at Sheppard Field, Texas. We have been married now two months and have been very happy in spite of the relative uncertainty of army life in war times.

I have hoped on several occasions to get a chance to visit Boston, but so far no chance has come. Perhaps a chance will come soon and I may be able to sit down in your office again and pass the time of day for a spell. Just in case I don't show up for a while to come, please give my regards to all there, and tell them I want an invitation to afternoon tea when this mess is all over.

E BEN ALEXANDER, '39

Sheppard Field  
Wichita Falls, Tex.

TO THE EDITOR:

This is just by way of locating one member of your eminent (and at present largely

belligerent) body. I received today a copy of the M.G.H. NEWS, which gave me a heavy touch of nostalgia. (I can refer to this disease now that it has official place on the Army Standard "diagnosis" list).

In November I was suddenly transferred from Camp White, Ore., where I was chief of the orthopaedic section, Station Hospital, down here, where I am chief medical officer for this project, now made public, but concerning which I can of course tell you nothing. You may take it for granted, however, that we will NOT have a white Christmas here!

By the way, my younger brother Christopher, '33, is now a Major, M.C. with Army General Hospital #19, Camp Livingston, La. To date they are still chewing their nails, waiting for embarkation orders. #19 was formed from the Rochester General Hospital, Rochester, N. Y. with their commanding officer, Col. Edward T. Wentworth, '13 who was chief of the orthopaedic service in peace time. Chris is chief of the infectious disease section, I think. He had a long service in Walter Reed on extended active duty, before he joined his unit when it was activated. Youngest brother, Bob (who has no Harvard connection) is a Lieutenant in the air corps.

Ed Thorp seems to be having an active existence for himself over wherever that censorship smudge stands for. What of some other classmates—where are they? John E. Brown, Jr., Sven Gundersen, Charlie Noble, Fran Bascom, Ted Fender, Ken Thompson, and many others?

Meantime, I'm catching up on my Spanish, and gradually recalling to mind a few of the things I thought I learned in second year parasitology, meantime with an eye out for nice industrial accidents!

'Till again with my best to all my old friends,

EDWARD PARNALL, '29

% Pan American Highway  
U. S. Engineer Department  
Managua, Nicaragua

## TO THE EDITOR:

After considerable wandering, the October issue of the BULLETIN reached me. Please note that below is my correct address—and is also that of John L. Wilson, '39. Both of us are Lieutenants, he in the Naval Reserve, and I in the regular Navy, and we are both flight surgeons, serving with an advance base unit.

Not long ago I saw Richard D. Nies, '38, whose address now is Navy #1000, Fleet P.O., San Francisco. . . Edward R. Evans, also of our class, is with an Army Evacuation Hospital near Los Angeles. I don't know his service address, but his home is 930 East Broadway, San Gabriel, Calif. His present rank is that of First Lieutenant. . . Through a grapevine, we heard that Ed Smith, of the Class of '38, is in one of the hottest combat areas in the Pacific. He's a Lieutenant in the Naval Reserve, and when last heard from was serving with a Marine outfit.

We all look forward eagerly to receiving the BULLETIN.

HUNT B. JONES, '38  
Lieut. (MC) USN

Navy #1105 F.P.O.  
San Francisco

## TO THE EDITOR:

Several months ago I made a stab at writing a few of my classmates on other fighting fronts, those whose addresses appeared in the BULLETIN. Shortly after we made our landing here at Guadalcanal all of my personal belongings were destroyed. The atmosphere has cleared a little now, and I should like to try again to contact a few of the Class of 1938, if you will be good enough to send me what you have in the way of addresses. There are occasional lulls when one has time to think of home and friends.

For those of our Class in the Army a

word of advice: You had better hurry up and get moving if you want to get in on this war. It's only a step from here to Tokyo, and don't the Marines know it!

EDWARD L. SMITH, '38  
Lt. U.S.N.R.

## TO THE CLASS OF 1926

*Merry Christmas and Happy New Year  
to you all.*

And it should be if we don't get over confident. Had quite a talk with Ted Badger at Edwards while he was awaiting a transport last spring and expect he is over here too but have been unable to locate him. Also had several visits with Maj. Dick Stetson at Devens just before I came overseas. While on a short leave recently I visited Harvard House at Stratford-on-Avon and put my name in the graduates register there and they really put themselves out to show me around the place. I also have a relic from the chapel in London where John Harvard was baptized which was bombed out during the 1940 blitz. Recently visited the hospital being run by the original Harvard unit—it is here that our monthly water analysis is done. Also saw Col. Cutler at a nearby officer's mess. That is all the Crimson news I have except that Fred Lake (Med.) and Bob Legg (Dent.), classes not known, are officers in this regiment. At present I am second in command of the regiment (executive officer) and also regimental surgeon. In addition I am summary court officer, President of the Special Court, camouflage officer and auditor—you see the many things an M.D. can do for you. Sooner or later we will be on our way to new fields and will try to give you news from there.

Sincerely,

JOHN W. MCKOAN, JR., '26  
Lt. Col., M.C., U. S. Army  
(V-Mail Letter to the Class)



